| | ı |
|---------------|---|
| $\overline{}$ | |
| | ۱ |
| \geq | ١ |
| | ۱ |
| w | i |
| • | į |
| <u> </u> | |
| 1 | • |

UTILITY
PATENT APPLICATION
TRANSMITTAL

+

· 图图第

| Attorney Docket No. 862.C2302 | | | |
|-------------------------------|--|--|--|
| First Na | med Inventor or Application Identifier | | |
| KAZUYA SAKAMOTO, E | ET AL | | |
| E | | | |

| | 0 (Onto | | Opprovisional applications under 37 CFR 1 53(h)) | | KAZUYA SAKAMOTO, ET AL. | | | |
|-------------|--|---|--|---------------------|---|--------------------------------------|---|---|
| | (Only for new nonprovisional applications under 37 CFR 1.53(b)) | | | Express Mail L | Express Mail Label No. | | | |
| | See MPEP chapter 600 concerning utility patent application contents. | | | ADDRI | Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231 | | | |
| | 1. X | 1. X Fee Transmittal Form (Submit an original, and a duplicate for fee processing) | | | 7. | | | |
| | 2. Applicant claims small entity status. See 37 CFR 1.27. | | | 8. | | nd/or Amino Acid S all necessary) | equence Submission . | |
| | 3. X | Specification | Total Pag | es 44 | | | omputer Readable | |
| | 4. X | Drawing(s) (35 US | SC 113) Total She | ets 14 | | | tion Sequence Listi CD-ROM or CD-R (| = S == 1 |
| | 5. | Oath or Declaratio | n <i>Total Pag</i> | es | | ii p | paper | 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| | 5 | a. Newly e | executed (original or cop | y) | | | | identity of above copies |
| | # 9 # | | | | | ACCOM | PANYING APPLIC | ATION PARTS |
| | b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) | | | 9. | g. Assignment Papers (cover sheet & document(s)) | | | |
| | is | i. <u>DELETION OF INVENTOR(S)</u> Signed Statement attached deleting | | | 10. | | (b) Statement is an assignee) | Power of Attorney |
| 17 17 12 12 | inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Application Data Sheet. See 37 CFR 1.76 | | | see 11. | 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations | | | |
| | | | | 12. | | | | |
| | | | | | 13. | Preliminary / | Amendment | |
| 12 | | | | | 14. X | | eipt Postcard (MPE specifically itemized | |
| 202 | | | | | 15. | | py of Priority Docun io <i>rity is claimed</i>) | nent(s) |
| | | | | | 16. | Other: | | |
| - | | | | | | | | |
| ł | 17. If a | CONTINUING APP | LICATION, check appr | opriate box and sup | ply the requisite in | formation: | | |
| | Continuation Divisional Prior application information: Examiner Continuation-in-p | | | | oart (CIP) of prior application No/ Group/Art Unit: | | | |
| | For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | | | | | |
| Ì | | | | 18. CORRES | SPONDENCE ADD | | | |
| | X Customer Number or Bar Code Label (Insert Customer No. or Atlach bar code label here) or Correspondence address below | | | | pondence address below | | | |
| Į | NAME | <u> </u> | | | | | | |
| | | | | | | | | |
| Í | Address | · | | | | | | |
| | City | | | State | | | Zip Code | |
| | Country | | | Telephone | | | Fax | |

| | (1) FOR | (2) NUMBER FILED | (3) NUMBER EXTRA | (4) RATE | (5) CALCULATIONS | |
|---|--|------------------------------|------------------|-------------------------------|------------------|--|
| | TOTAL CLAIMS (37 CFR 1.16(c)) | 53-20 = | 33 | X \$ 18.00 = | \$ 594.00 | |
| | INDEPENDENT CLAIMS (37 CFR 1.16(b)) | 9-3 = | 6 | X \$ 80.00 = | \$ 480.00 | |
| | MULTIPLE DEPENDEN | T CLAIMS (if applicable) (37 | CFR 1.16(d)) | \$270.00 = | \$ 0.00 | |
| | | | | BASIC FEE (37 CFR 1.16(a)) | \$ 710.00 | |
| | , | | Total of | above Calculations = | \$ 1784.00 | |
| | Reduction by | | | | | |
| | TOTAL = \$ | | | | | |
| b. | | | | | | |
| 20. X A check in the amount of \$\frac{1784.00}{} to cover the filing fee is enclosed. 21. A check in the amount of \$\frac{1}{} to cover the recordal fee is enclosed. | | | | | | |
| 21. | _ | ount of \$ to | | | | |
| The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205: a. X Fees required under 37 CFR 1.16. b. Fees required under 37 CFR 1.17. | | | | | | |
| a. | X Fees requ | uired under 37 CFR 1.16. | | | | |
| a. | | | | | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED | | | | |
|---|--------------------------------------|--|--|--|
| NAME | Mark A. Williamson - Reg. No. 33,628 | | | |
| SIGNATURE | MarliMilleain | | | |
| DATE | July 18,-2001 | | | |

MAW/dc